

THE JEFFERSON COUNTY INTELLECTUAL AND
DEVELOPMENTAL DISABILITIES AUTHORITY, Inc.

117 Gemini Circle, Suite 407
Homewood, Alabama 35209

THREE YEAR PLAN

2022-2025

July 11, 2022

Executive Director: Kendra Eidson

JEFFERSON COUNTY THREE-YEAR PLAN

2022-2025

Name of 310 Board:

The Jefferson County Intellectual and Developmental Disabilities Authority, Inc.; referenced below as The JCIDDA.

Counties Served:

Clay, Coosa, Calhoun, Cleburne, Jefferson, Randolph and Talladega Counties in Alabama.

Description of Supports and Services Provided:

The two primary services delivered by The JCIDDA are Targeted Case Management and Single Point of Entry.

The JCIDDA holds a contract with the Alabama Department of Mental Health for Targeted Case Management / Support Coordination for Adults with a primary diagnosis of an Intellectual Disability. In this case, adults are defined as individuals 18 years of age and older with an IQ of 70 or below. Exceptions are granted to children under the age of 18 who are receiving services under The ID/DD Home and Community Based waiver or the LAH Living At Home Waiver. Case Management / Support Coordination is a person driven service including the areas of needs assessment, person centered planning, service arrangement, social support, reassessment/follow-up and monitoring.

The State of Alabama Division of Developmental Disabilities maintains a statewide waiting list for persons waiting for services. On the local level, a 310 Board is designated by the DMH DD Division to accept referrals, collect the necessary documentation for access to the waiting list and submit same to the applicable Regional Office. For Jefferson, Calhoun, Clay, Cleburne, Coosa, Talladega, and Randolph Counties. The JCIDDA is the designated agency for the waiting list and that function is referred to as Single Point of Entry. This function also includes assisting the individuals in moving from the waiting list into services as these services become available. This is accomplished in concert with the DMH Regional Office and applicable Provider agency.

Population(s) Served:

Description

Currently, The JCIDDA serves a total of 880 individuals with a primary diagnosis of an Intellectual Disability. Due to the specifications of our contract, approximately 95% are adults, 5% children. That said our population covers all ages, ethnicities and live in neighborhoods throughout Jefferson, Calhoun, Clay, Coosa, Cleburne, Talladega, Sylacauga, Randolph County. The level of supports required by our population varies greatly from those who need very minimal support to those in need of very intense levels of support in areas such as self-care, communication, behavioral support, mobility and medical issues. Our group includes people with Developmental Disabilities such as; Intellectual Disability, Cerebral Palsy, Autism Epilepsy, Mental Illness and various rare genetic disorders.

A total of 583 persons resides in supported residential settings operated by our provider agencies. Some live independently or with families, while a total of 87 receive in-home supports, primarily Personal Care. This number has grown slowly but steadily throughout the years.

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Description Continued:

A total of 691 persons receives day services ranging from Supported Employment, Training and Activity programs. A total of 29 persons receives self-directed waiver services, and 27 persons receive Support Coordination and no waiver services. Unfortunately, an approximate number of 340 of individuals are waiting for services.

Mission Statement:

It is the mission of the Jefferson County Intellectual and Developmental Disabilities Authority, Inc. (JCIDDA) to provide for system of effective and efficient services to citizens of Jefferson, Calhoun, Clay, Cleburne, Coosa, Talladega and Randolph Counties, Alabama, with intellectual disabilities and/or other developmental disabilities. This system of services endorses the precepts that services shall be person centered and will be individual and/or family driven; shall be provided in the least restrictive setting; shall maximize individual and/or family input; shall use existing support and service delivery systems; shall be result oriented; and shall utilize individual, family, staff, subcontractors and other external influences as major indicators of quality.

The foregoing Mission Statement shall be reviewed and approved annually by the Board of Directors and distributed annually among all participants for review and input to be reviewed and considered.

Vision Statement:

The ultimate goal of JCIDDA is for every person with a developmental disability within the seven counties in Alabama that we serve to receive the supports they need in a timely manner by fully trained professionals in a community-based setting.

Description of Planning Cycle:

The Executive Director will develop a draft plan based on existing data and information. The draft will then be submitted to the Board of Directors, and other relevant stakeholders for review and comment. Revisions are then made as needed and submitted to the Board for final approval before submitting to the Alabama Department of Mental Health.

Planning Cycle Timeframe:

January 1, 2022 - December 31, 2025

Key Stakeholders and their Roles:

Stakeholders include:

- People we support or those waiting for services
- Family members and legal guardians
- Service Providers for People with Disabilities throughout all seven counties
- Public School Systems throughout all seven counties
- Department of Human Resources
- Municipal Governments
- Legislative Delegation throughout all seven counties
- Department of Mental Health/ID-DD Division/Region V Community Services
- Staff of JCIDDA

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Key Stakeholders and their Roles (continued):

Throughout the planning and implementation process feedback from stakeholders will be sought through surveys, planning meetings and day to day contact. Once the plan is approved copies will be distributed to stakeholders throughout Jefferson County and will be available to the general public on request. It is vitally important that decision makers are informed of the profound problem the extensive waiting lists are for people with disabilities and their families in Jefferson County.

Method of Needs Assessment:

Perhaps the most important source of information in this area is Waiting List information generated by the DMH/DD Division/Region V based on information submitted by staff of JCIDDA. Equally important are internal numbers regarding the number of incoming referrals per month and number of persons pending file completion for the Statewide Waiting List.

Consumer Satisfaction Surveys and Certification Site Visit reviews supply important information for evaluating existing services along with other information such as Incident data and Quality Improvement Reports. Ongoing day to day contact with providers and family members are also an important source of information.

All of this information is reviewed and results in the development of Goals and Objectives.

Greatest Area(s) of Unmet Needs:

In all seven counties served in Alabama, unmet needs exist in every area. According to the most recent listing distributed, a total of 667 people are waiting for residential, day or supports. This represents approximately 19% of the statewide total compared to our population share of 13.78% (658,466/4,779,736, Census Bureau 2010). Most people are shown as needing at least two of the three services if not all three.

For a number of reasons, we suspect the total number waiting of 667 does not reflect the true need. The number of referrals that JCIDDA is receiving from the Department of Mental Health Call Center for DMH services is increasing drastically daily. The number of persons that is currently on the Statewide waiting list is just a small fraction of a need within the State of Alabama and within the seven counties currently served by JCIDDA.

- Transportation, while not a contract service for our providers is often cited as a need by consumers and providers alike both in meetings and in day to day interaction.
- Respite, especially emergency respite is under the general category of supports but is also cited as a need in both conversations and public meetings and bears specific mention as a significant unmet need.

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Needed Expansions:

With waiting list numbers as substantial as noted above, expansion is needed in all areas including residential, employment/day supports and in-home supports such as respite and personal care. Current policies and practices related to persons waiting is to provide supports/services only to those in the most extreme emergency or near emergency situations.

As a result, many more persons and their families go without supports for many, many years. This usually results in a loss of skills gained while in school and/or other services, this only worsens the longer an individual is on the waiting list.

The ideal solution would be to establish services for adults with intellectual and developmental disabilities as an entitlement for all who can establish eligibility and need.

Current and Future Funding Resources:

Current funding for The JCIDDA comes from a contract for Targeted Case Management/Support Coordination with the Alabama Department of Mental Health. The current rate of reimbursement is \$6.07 per five-minute unit, not to exceed 56 hours per year per person supported. This is a notable increase over our previous rate of the \$5.28 rate (with minimum deviations above or below) since 2009. Unfortunately, due to recent changes in Medicaid billing regulations, travel and documentation are no longer billable offsetting much of the increase.

Plan: Goals and Objectives:

Goal 1: Find a solution to reduce the need for Emergency Placement / Services.

While the overall funding outlook remains a major impediment to this effort, this is such an important issue for all Counties and the State, that we must do all we can to continue to advocate for the hundreds of persons within all seven counties served who are unable to obtain the services they so seriously need. Emergency need for placement has increased over the last year.

Goal 2: Enhance Support Coordinator Skills in Person Centered Planning.

While we have excellent staff here at JCIDDA, there is always opportunity for improvement. During the past two years the organization has worked to **strive** for excellence in all that we do each day in providing services to persons not only in Jefferson County but since 2020 in the additional six Counties that we currently serve. During a pandemic we grew while never wavering from doing our best to meet the needs of the persons being served and those in need of services. Staff have also attended a series of workshops on Personal Outcomes and Person Centered Plans for those we support. The plan is to continue these efforts as training is valuable to maintain the skills and tools needed to assist those we serve.

Goal 3: Continue to improve Certification and Satisfaction Survey Outcomes.

Since 2020 JCIDDA has endured unique and unforeseen ways of serving persons while enduring numerous changes in required documentation to include the most cumbersome being the PCP plan from DMH and Medicaid. While we still have areas which require improvement, trainings continue as well as changes to services documentation which JCIDDA Support Coordination will strive to be successful in meeting the needs of those persons that we serve.

Satisfaction Survey results continue to result in excellent to good; the return rate of completed surveys could improve. JCIDDA has opened two new offices and taken on six more counties all during a pandemic while striving for continued improvement.

Plan Monitoring & Evaluation:

Planning and evaluation is always an ongoing process and should occur daily for each employee in their respective role. As to formal evaluation, our Quality Improvement Systems Plan did call for a monthly evaluation of our Support Coordination and Single Point programs as well as an annual Satisfaction Survey. During the Covid Pandemic JCIDDA performed under the DMH and Medicaid Appendix K plan, to continue maintaining services for the persons we serve in each county. We have been evaluating the plan quarterly while under the Appendix K. Our Board of Directors meets monthly to discuss and decide on all issues facing the agency at any given time. Externally we are reviewed randomly by The Alabama Medicaid Agency and every one to two years by the Alabama Department of Mental Health. The Region V Case Management Liaison monitors JCIDDA by file reviews quarterly and provides trainings as needed. Support Coordinators and the JCIDDA Director attend DMH and Medicaid trainings as directed or required.

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